

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	10/190935	FILING DATE
							APPLICANT(S)		
							CLAIMS		
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP			
1									
2		1							
3		2							
4		2							
5		2							
6		2							
7		2							
8		2							
9		2							
10		1		1					
11	1		1						
12		1		2					
13		2		2					
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16		2		2					
17		2		2					
18	1		1						
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47									
48									
49									
50									
TOTAL IND.	3			5					
TOTAL DEP.	3			5					
TOTAL CLAIMS	3			5					